

County: Waukesha  
MASONIC HEALTH CARE CENTER, INC.

Facility ID: 9540

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400 NORTH MAIN STREET  
DOUSMAN 53118 Phone: (262) 965-9245  
Operated from 1/1 To 12/31 Days of Operation: 366  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/00): 84  
Total Licensed Bed Capacity (12/31/00): 84  
Number of Residents on 12/31/00: 83

Ownership:  
Highest Level License:  
Operate in Conjunction with CBRF?  
Title 18 (Medicare) Certified?  
Average Daily Census:

Nonprofit Church-Related  
Skilled  
Yes  
Yes  
82

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	39.8
Supp. Home Care-Personal Care	No					1 - 4 Years	43.4
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.2	More Than 4 Years	16.9
Day Services	No	Mental Illness (Org./Psy)	22.9	65 - 74	2.4		
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	31.3		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	47.0	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	3.6	95 & Over	18.1	Full-Time Equivalent	
Congregate Meals	No	Cancer	2.4			Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	4.8		100.0	(12/31/00)	
Other Meals	No	Cardiovascular	22.9	65 & Over	98.8		
Transportation	No	Cerebrovascular	12.0			RNs	7.4
Referral Service	No	Diabetes	2.4	Sex	%	LPNs	8.6
Other Services	Yes	Respiratory	2.4			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	26.5	Male	26.5	Aides & Orderlies	
Mentally Ill	No			Female	73.5		27.4
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay			Managed Care			Total No.	Percent Of All Residents
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate		
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	1	2.8	\$170.00	0	0.0	\$0.00	1	1.2%
Skilled Care	3	100.0	\$173.09	41	93.2	\$110.07	0	0.0	\$0.00	33	91.7	\$151.00	0	0.0	\$0.00	77	92.8%
Intermediate	---	---	---	3	6.8	\$90.53	0	0.0	\$0.00	2	5.6	\$131.00	0	0.0	\$0.00	5	6.0%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	3	100.0		44	100.0		0	0.0		36	100.0		0	0.0		83	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Percent Admissions from:						
Private Home/No Home Health	17.7	Bathing	0.0	72.3	27.7	83
Private Home/With Home Health	0.0	Dressing	8.4	53.0	38.6	83
Other Nursing Homes	10.1	Transferring	24.1	50.6	25.3	83
Acute Care Hospitals	57.0	Toilet Use	13.3	50.6	36.1	83
Psych. Hosp. -MR/DD Facilities	0.0	Eating	67.5	19.3	13.3	83
Rehabilitation Hospitals	3.8	*****				
Other Locations	11.4	Continence		%	Special Treatments	%
Total Number of Admissions	79	Indwelling Or External Catheter		6.0	Receiving Respiratory Care	10.8
Percent Discharges To:		Occ/Freq. Incontinent of Bladder		45.8	Receiving Tracheostomy Care	0.0
Private Home/No Home Health	35.0	Occ/Freq. Incontinent of Bowel		39.8	Receiving Suctioning	0.0
Private Home/With Home Health	0.0	Mobility			Receiving Ostomy Care	2.4
Other Nursing Homes	0.0	Physically Restrained		0.0	Receiving Tube Feeding	0.0
Acute Care Hospitals	5.0	Skin Care			Receiving Mechanically Altered Diets	67.5
Psych. Hosp. -MR/DD Facilities	0.0	With Pressure Sores		4.8	Other Resident Characteristics	
Rehabilitation Hospitals	2.5	With Rashes		1.2	Have Advance Directives	100.0
Other Locations	5.0				Medications	
Deaths	52.5				Receiving Psychoactive Drugs	49.4
Total Number of Discharges (Including Deaths)	80				*****	

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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	This Facility	Ownership: Nonprofit		Bed Size: 50-99		Licensure: Skilled		All Facilities	
	%	Peer	Group Ratio	Peer	Group Ratio	Peer	Group Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.6	91.5	1.07	86.1	1.13	81.9	1.19	84.5	1.15
Current Residents from In-County	81.9	87.4	0.94	90.2	0.91	85.6	0.96	77.5	1.06
Admissions from In-County, Still Residing	35.4	27.5	1.29	22.1	1.61	23.4	1.51	21.5	1.65
Admissions/Average Daily Census	96.3	115.2	0.84	168.8	0.57	138.2	0.70	124.3	0.78
Discharges/Average Daily Census	97.6	118.5	0.82	169.2	0.58	139.8	0.70	126.1	0.77
Discharges To Private Residence/Average Daily Census	34.1	35.5	0.96	70.9	0.48	48.1	0.71	49.9	0.68
Residents Receiving Skilled Care	94.0	89.5	1.05	93.2	1.01	89.7	1.05	83.3	1.13
Residents Aged 65 and Older	98.8	96.9	1.02	93.4	1.06	92.1	1.07	87.7	1.13
Title 19 (Medicaid) Funded Residents	53.0	57.6	0.92	51.5	1.03	65.5	0.81	69.0	0.77
Private Pay Funded Residents	43.4	35.4	1.22	36.3	1.19	24.5	1.77	22.6	1.92
Developmentally Disabled Residents	0.0	0.4	0.00	0.4	0.00	0.9	0.00	7.6	0.00
Mentally Ill Residents	22.9	30.8	0.74	33.0	0.69	31.5	0.73	33.3	0.69
General Medical Service Residents	26.5	24.9	1.06	24.2	1.09	21.6	1.23	18.4	1.44
Impaired ADL (Mean)	52.8	50.5	1.05	48.8	1.08	50.5	1.05	49.4	1.07
Psychological Problems	49.4	45.5	1.09	47.7	1.04	49.2	1.00	50.1	0.99
Nursing Care Required (Mean)	10.8	6.6	1.65	7.3	1.49	7.0	1.54	7.2	1.52